## PHA 5-Year and Annual Plan

### U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information  PHA Name: Clermont Metropolitan Housing  PHA Type: ☐ Small ☐ High  PHA Fiscal Year Beginning: (MM/YYYY):	Performing	☐ Standard	PHA Code: OH038  HCV (Section 8)		
2.0	Inventory (based on ACC units at time of F Number of PH units: 219	Y beginning i	n 1.0 above) Number of HCV units: 8	91		
3.0	Submission Type	Annual P	lan Only	5-Year Plan Only		
4.0	PHA Consortia	HA Consortia	: (Check box if submitting a joi	nt Plan and complete table belo	ow.)	
	Participating PHAs		Program(s) Included in the	Programs Not in the Consortia	No. of Units in Each Program	
		Code	Consortia	Consortia	PH	HCV
	PHA 1: PHA 2:				+	+
	PHA 2: PHA 3:				+	+
5.0	<b>5-Year Plan.</b> Complete items 5.1 and 5.2 on	ly at 5-Year F	lan update.			
	-					
5.1	Mission. State the PHA's Mission for servir jurisdiction for the next five years: The missi who are elderly or disabled, with safe, decen of their lives. The Clermont Metropolitan Homanner. The Clermont Metropolitan Housin in order to accomplish this mission.	on of the Cleat t and affordate ousing Author	rmont Metropolitan Housing Au ole housing opportunities as they rity is committed to operating the	athority is to assist low-income y strive to achieve self-sufficient ne Authority in a caring, efficient	families, incluncy and improvent, ethical and	uding those ve the quality professional

5.2 Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

#### PHA Goal: Expand the supply of assisted housing

- 1. Apply for additional rental vouchers should they become available.
- 2. Acquire built units or developments The Authority also plans to purchase a development or single family homes to add to the public housing stock.

#### PHA: Goal: Improve the quality of assisted housing

- 1. Improve public housing management Continue to keep PHAS scoring high and maintain High Performer status.
- 2. Renovate or modernize public housing units Continue to renovate and modernize public housing units through Capital Fund projects.
- 3. Provide replacement public housing Acquire additional housing for the Authority's public housing stock as replacement for units removed through a disposition plan.

#### PHA Goal: Increase assisted housing choices:

- 1. Conduct outreach efforts to potential voucher landlords The Authority plans to have at least one Section 8 landlord meeting per year as well as providing material regarding the HCV program to prospective landlords.
- 2. Continue using the Go Section 8 program to work with current and new landlords.
- 3. Working with the Fast Track Out of Age Foster Children Program.

#### PHA Goal: Provide an improved living environment

1. Designate developments or buildings for particular resident groups (elderly, person with disabilities) – Continue to renew the elderly designation of units at the Bethel Woods complex.

#### PHA Goal: Promote self-sufficiency and asset development of families and individuals

- 1. Increase the number and percentage of employed persons in assisted families The Authority will refer clients to Clermont County's Work Force One for employment and training opportunities as well as post training and educational information of the agency's administrative office.
- 2. Provide or attract supportive services to improve assistance recipients' employability Caseworkers at Clermont MHA will notify clients of job opportunities plus all new residents on the PH program can fill out a skills survey for possible job opportunities with the agency. The Authority's FSS program will also be utilized to assist clients with becoming self-sufficient through employment.
- 3. Provide or attract supportive services to increase independence for the elderly or families with disabilities Clermont MHA will continue to work closely with Clermont County Department of DD and Senior Services to assist clients with supportive services. The Authority will also be offering medical seminars for residents on site through Superior Care Plus.
- 4. Continue to assist clients with self-sufficiency goals through the Section 8 FSS program.

#### PHA Goal: Ensure equal opportunity and affirmatively further fair housing:

- 1. Continue to operate the Clermont Metropolitan Housing Authority in full compliance of Equal Opportunity and Fair Housing laws and regulations.
- 2. Continue working with the YWCA's Transitional Living Grant which secures affordable housing for women who are victims of domestic violence

#### Progress Report on previous goals and objectives:

- 1. Clermont MHA applied for and received vouchers under the Shelter + Care program.
- 2. The Authority built 16 additional one bedroom units at the Bethel Woods complex.
- 3. Clermont MHA received High Performer Status in both SEMAP and PHAS scores during the past five years.
- 4. Renovated public housing units with ARRA and Capital Fund grant funding.
- 5. Participating in Clermont County's Affordable Housing Coalition and Life Point Solution's BART Program as outreach efforts for potential landlords. Began using the Go Section 8 software to reach current and new landlords.
- 6. Adopted a VAWA policy in 2007.
- 7. Partnered with the YWCA on the Transitional Living Grant to assist with securing affordable housing for women who are victims of domestic violence.

#### PHA Plan Update

6.0

- (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: No major changes since the last plan submission.
- (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The public may obtain copies of the 5-Year and Annual Plan at the Clermont Metropolitan Housing Authority Administrative Office located at 65 S. Market St., Batavia, Ohio 45103. The required PHA Plan Elements are available to the public at the Authority's Administrative Office.

7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.  CMHA will not be applying for Hope VI or Mixed Finance Modernization or Development  No Demolition or Disposition activities are planned.  No Public Housing Conversion activities are planned.  CMHA has not applied for a homeownership program.  CMHA does not have a project based voucher program.
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.
	CMHA has completed a Capital Fund Program Annual Statement/Performance and Evaluation report for the current year and all open Capital Fund Grants.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
	The Capital Fund Program Five-Year Action Plan is included as part of this year's Annual Plan.
8.3	Capital Fund Financing Program (CFFP).  Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

Based on the criteria from available sources the following are the housing needs of the low, very low and extremely low income families in the jurisdiction of Clermont MHA:

The three main housing needs of the income populations served by Clermont MHA are:

The lack of affordable/accessible rental housing.

Lack of attainable/available housing.

Inadequate housing for the homeless and availability of transitional housing.

Not required for high performing PHA's when only submitting the annual plan.

	Public Housing	Section 8	
Demographic			
Extremely low income	366	456	
Very low income	30	85	
Low income	4	4	
Elderly families	27	20	
Families with disabilities	50	69	
Race			
White	384	477	
Black	6	65	
Asian		1	
American Indian		2	
Ethnicity			
Hispanic	4	8	
Bedroom size			
One bedroom	73		
Two bedrooms	193		
Three bedrooms	113		
Four bedrooms	19		
Five or more bedrooms	2		
Total families on the waiting list	400	545	

9.0

Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

Clermont MHA strategies to address the housing needs of its jurisdiction will include the following:

Maximize the number of affordable units available to the PHA within its current resources by employing effective maintenance and management policies to minimize the number of public housing units off-line by continuing to maintain a low amount of days for unit turnover of vacated public housing.

Acquire or build more public housing units.

Increase the number of affordable housing units by applying for additional vouchers if available.

Seek designation of public housing for the elderly.

Continue to target available assistance to families at or below 30% of the area median income.

Continue to work with the Housing Advisory Committee for Clermont County in order to identify the housing needs and issues for the Authority's jurisdiction for developing strategies for the CHIS.

9.1

Additional Information. Describe the following, as well as any additional information HUD has requested.

(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. Not required for high performing PHA's when only submitting the annual plan. Section 5.2 describes the Authority's mission and meeting goals. Progress in meeting the goals is described in Section 5.2

10.0

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification" Not required for high performing PHA's when only submitting the annual plan.

A significant amendment and substantial deviation / modification to the PHA Plan is as follows:

- Changes to rent or admissions, or tenant selection policies; addition of non-emergency work items which are not included in the current Annual or Five Year Plan;
- Addition of non-emergency work items which are not included in the current Annual or Five Year Plan or change in the use of replacement reserve funds under the Capital Fund;
- Additions of new activities not included in the current PHDEP Plan; and
- Any change with regard to demolition or disposition, designation, homeownership program or conversion activities.
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
  - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
  - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
  - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
  - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
  - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
  - (g) Challenged Elements
  - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
  - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

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Part I:	Summary					
PHA Na	ame: Clermont Metropolitan	Grant Type and Number Capital Fund Program Grant No: 501 Replacement Housing Factor Grant N Date of CFFP:	.10 Jo:			FFY of Grant: 2010 FFY of Grant Approval: 2010
		Reserve for Disasters/Emergencies	1	☐ Revised Annual Stater ☐ Final Performance an		)
Line	Summary by Development	t Account		Total Estimated Cost		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not ex	xceed 20% of line 21) <sup>3</sup>	90,532			
3	1408 Management Improver	ments				
4	1410 Administration (may n	not exceed 10% of line 21)	32,000			
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		18,000			
8	1440 Site Acquisition					
9	1450 Site Improvement		64,000			
10	1460 Dwelling Structures		118,888			
11	1465.1 Dwelling Equipment	t—Nonexpendable	30,000			
12	1470 Non-dwelling Structur	es				
13	1475 Non-dwelling Equipme	ent				
14	1485 Demolition					
15	1492 Moving to Work Demo	onstration				
16	1495.1 Relocation Costs					
17	1499 Development Activitie	es <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	Summary				
PHA Nam Clermont Metropoli	Grant Type and Number Capital Fund Program Grant No: 501-10			FFY of Grant:2010 FFY of Grant Approval: 2010	
Type of G					
Origi	inal Annual Statement Reserve for Disasters/Em	ergencies		Revised Annual Statement (revision no:	1 )
Perfo	ormance and Evaluation Report for Period Ending:			Final Performance and Evaluation Repo	
Line	Summary by Development Account		Total Estimated Cost		Actual Cost 1
		Origina	nl Revised <sup>2</sup>	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	353,420			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signature of Executive Director Sarah Kincaid  Date 7/9/10  Signature of Public Housing Director  Date					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Cap CFI			at Type and Number all Fund Program Grant No: 501.10 P (Yes/ No): accement Housing Factor Grant No:				Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	1 3				Total Estimated Cost		Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
OH038051967	Public Housing Shortfall		1406		90,532					
OH038051967	Partial salary for Executive Dir	ector	1410		5,439					
OH038051967	Partial salary for CF Inspector		1410		24,181					
OH038051967	Partial salary for Financial Spec		1410		2,180					
OH038051967	Sundry expenses for Capital Fu	nd	1410		200					
OH038051967	Architect, permits, fees		1430		18,000					
OH038051967	Replace concrete patio		1460	2 units	4,000					
OH038051967	Replace concrete driveway		1460	1 unit	3,500					
OH038051967	Install new air conditioners		1465	65 units	30,000					
OH038051967	Replace greenhouse in commun building	•	1450	1 location	10,000					
OH038051967	Replace all baseboard heaters , heaters and thermostats	recess	1460	65 units	36,200					
OH038051967	Replace all walkway posts		1460	1 location	36,466					
OH038051967	Remove large trees		1450	1 location	15,000					
OH038051967	Install new water main valves		1460	65 units	8,722					
OH038051967	Replace concrete entrance at community building		1450	1 location	4,000					
ОН038051967	Replace dumpster enclosures		1450	4	18,000					
ОН038051967	Install new pole lights		1450	4	17,000					
OH038051967	Install new floor tile/stair treads	8	1460	5 units	30,000					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	s									
	Ietropolitan Housing Authority	Capital F CFFP (Y	Grant Type and Number Capital Fund Program Grant No: 501.10 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal	Federal FFY of Grant: 2010			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	r Work	Development Account No.	Quantity	Total Estim	nated Cost	Total Actual	Cost	Status of Work	
Tentines					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
				+						
					†			1		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Sch	nedule for Capital Fun	d Financing Program			
PHA Name: Clermont Metro	Federal FFY of Grant: 2010				
Development Number Name/PHA-Wide Activities		l Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
OH0380051967	07/14/2012		07/14/2014		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Summary					
	me: Clermont Metropolitan Authority	Grant Type and Number Capital Fund Program Grant No: 501 Replacement Housing Factor Grant N Date of CFFP:	.08 No:			FFY of Grant 2008 FFY of Grant Approval: 2008
		Reserve for Disasters/Emergencies	S	☐ Revised Annual States ☑ Final Performance an		
Line	Summary by Development		,	Total Estimated Cost		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not ex	xceed 20% of line 21) 3	42,581		42,581	42,581
3	1408 Management Improver	ments				
4	1410 Administration (may n	ot exceed 10% of line 21)	30,148		30,148	30,148
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		19,656		19,656	19,656
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		239,380		239,380	239,380
11	1465.1 Dwelling Equipment	Nonexpendable				
12	1470 Non-dwelling Structur	es				
13	1475 Non-dwelling Equipm	ent				
14	1485 Demolition					
15	1492 Moving to Work Dem	onstration				
16	1495.1 Relocation Costs					
17	1499 Development Activitie	S <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	ummary				
PHA Nam Clermont Metropoli Housing A	Grant Type and Number Capital Fund Program Grant No: 501.08 Penlacement Housing Factor Grant No:		FFY of Grant: 2008 FFY of Grant Approval: 2008		
Type of G	rant				
Origi	nal Annual Statement Reserve for Disasters/Emerger	ncies		Revised Annual Statement (revision no	<b>)</b> : )
Perfo	rmance and Evaluation Report for Period Ending:			☑ Final Performance and Evaluation Re	
Line	Summary by Development Account		Total Estimated Cost		Actual Cost <sup>1</sup>
		Origina	al Reviseo	d <sup>2</sup> Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	331,765		331,765	331,765
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatur	re of Executive Director Da	te 8/10/10	Signature of Public I	Housing Director	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

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PHA Name: Clermont M	Metropolitan Housing Authority	Capital Fi	at Type and Number al Fund Program Grant No: 501.08 P (Yes/ No): accement Housing Factor Grant No:				Federal FFY of Grant: 2008					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual	Status of Work				
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>				
ОН038051967	Operations		1406		42,581		42,581	42,581	Complete			
OH038051967	Administrative		1410		30,148		30,148	30,148	Complete			
OH038051967	Architect		1430		19,656		19,656	19,656	Complete			
ОН038051967	Replacement of entrance & storm doors	n	1460		45,550		45,550	45,550	Complete			
ОН038051967	Installation of tub, surround, fauce medicine cabinet and exhaust far		1460		10,000		10,000	10,000	Complete			
OH038051967	Installation of ceiling mount file access, new siding, gutters, downspouts and shed door	r	1460		3,380		3,380	3,380	Complete			
OH038051967	Install new floor tile and stair tre	ads	1460		20,300		20,300	20,300	Complete			
OH038051967	Replacement of roofs, vents, flas gutters and downspouts	hing,	1460		103,500		103,500	103,500	Complete			
OH038051967	Installation of new windows		1460		26,400		26,400	26,400	Complete			
OH038051967	Installation of new vinyl siding		1460		21,750		21,750	21,750	Complete			
ОН038051967	Removal of garage door & insta of double door	llation	1460		8,500		8,500	8,500	Complete			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es											
PHA Name: Clermont Metropolitan Housing Authority			ype and Number Fund Program Grant N 'es/ No): nent Housing Factor O			Federal	Federal FFY of Grant: 2008					
Development Number Name/PHA-Wide Activities	General Description of Majo Categories	r Work	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work			
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>				
								1				
								1				
								1				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

edule for Capital Fun	d Financing Program			
	Federal FFY of Grant: 2008			
				Reasons for Revised Target Dates <sup>1</sup>
Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
6/12/2010		6/12/2012		
	politan Housing Aut All Fund (Quarter F Original Obligation End Date	Obligation End End Date Date	All Fund Obligated (Quarter Ending Date)  Original Obligation Obligation Obligation End Date  All Fund (Quarter F  Original Expenditure End Date End Date	All Fund Obligated (Quarter Ending Date)  Original Obligation Obligation End Date  All Funds Expended (Quarter Ending Date)  Original Expenditure End Date Date  Date

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

A Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	l Obligated Ending Date)	All Fund (Quarter F	s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

	Summary					
	nme: Clermont Metropolitan g Authority	Grant Type and Number Capital Fund Program Grant No: C Replacement Housing Factor Gran Date of CFFP:	DH10S03850109 t No:			FFY of Grant: 2009 FFY of Grant Approval: 2009
		☐ Reserve for Disasters/Emergenc t for Period Ending:	ies	☐ Revised Annual State		
Line	Summary by Development	Account		Total Estimated Cost		Total Actual Cost <sup>1</sup>
			Original	Revised <sup>2</sup>	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not ex	sceed 20% of line 21) 3				
3	1408 Management Improver	nents				
4	1410 Administration (may no	ot exceed 10% of line 21)	36,412		36,412	203
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		19,018		19,018	19,018
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		364,519		364,519	364,519
11	1465.1 Dwelling Equipment	Nonexpendable				
12	1470 Non-dwelling Structure	es				
13	1475 Non-dwelling Equipme	ent				
14	1485 Demolition					
15	1492 Moving to Work Demo	onstration				
16	1495.1 Relocation Costs					
17	1499 Development Activities	S <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	ummary									
PHA Nam Clermont Metropoli Housing A	Grant Type and Number Capital Fund Program Grant No: OH10S03850109  Perleasement Hausing Feater Grant No:		FFY of Grant:2009 FFY of Grant Approval: 2009							
Type of G										
Original Annual Statement Reserve for Disasters/Emergencies Revised Annual Statement (revision no:										
Performance and Evaluation Report for Period Ending:										
Line	Summary by Development Account		al Estimated Cost		Actual Cost 1					
		Original	Revised <sup>2</sup>	Obligated	Expended					
18a	1501 Collateralization or Debt Service paid by the PHA									
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment									
19	1502 Contingency (may not exceed 8% of line 20)									
20	Amount of Annual Grant:: (sum of lines 2 - 19)	\$419,949		\$419,949	\$383,740					
21	Amount of line 20 Related to LBP Activities									
22	Amount of line 20 Related to Section 504 Activities									
23	Amount of line 20 Related to Security - Soft Costs									
24	Amount of line 20 Related to Security - Hard Costs									
25	Amount of line 20 Related to Energy Conservation Measures									
Signatur	re of Executive Director Sarah Kincaid Date	7/9/2010 Si	gnature of Public Ho	ousing Director	Date					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Page	es										
PHA Name: Clermont N	Metropolitan Housing Authority	Capital I CFFP (Y	Type and Number Fund Program Grant P Yes/ No): ment Housing Factor		50109	Federal FFY of Grant: 2009					
Development Number Name/PHA-Wide Activities	ne/PHA-Wide Categories		Tork Development Quantity Total Est Account No.		Total Estimated Cost		Total Actual	Status of Work			
					Original	Rev	vised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
ОН038051967	Salaries and administrative exp	enses	1410		36,412			36,412	203	in process	
ОН038051967	Architect	1			19,018			19,018	19,018	complete and paid	
ОН038051967	Replacement of shingle roofs, vents, gutters, downspouts and flashing on all buildings		1460	3 sites	364,519			364,519	364,519	complete and paid	
				-							

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement. <sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es											
	Metropolitan Housing Authority	Grant Type and Number Capital Fund Program Grant No: OH10S03850109 CFFP (Yes/ No): Replacement Housing Factor Grant No:					Federal FFY of Grant: 2009					
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	ated Cost	st Total Actual Cost		Status of Work			
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>				

 $<sup>^{\</sup>rm 1}$  To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Sch	nedule for Capital Fun	nd Financing Program			
PHA Name: Clermont Metro		Federal FFY of Grant: 2009			
Development Number Name/PHA-Wide Activities		d Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
OH038051967	3/17/2010		3/17/2012		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011 Part I: Summary FFY of Grant: 2009 PHA Name: Clermont Metropolitan **Grant Type and Number** FFY of Grant Approval: 2009 Capital Fund Program Grant No: 501.09 Replacement Housing Factor Grant No: Date of CFFP: **Type of Grant** Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: **☒** Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report Summary by Development Account **Total Estimated Cost** Total Actual Cost 1 Line Original Revised<sup>2</sup> Obligated Expended Total non-CFP Funds 1406 Operations (may not exceed 20% of line 21) 3 47,693 47,693 47,693 1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 31,507 31,507 7,308 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 23,000 22,500 1440 Site Acquisition 1450 Site Improvement 2,000 1460 Dwelling Structures 10 252,563 11 1465.1 Dwelling Equipment—Nonexpendable 1470 Non-dwelling Structures 12 13 1475 Non-dwelling Equipment 14 1485 Demolition 15 1492 Moving to Work Demonstration 1495.1 Relocation Costs 16 17 1499 Development Activities 4

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	ummary								
PHA Nam Clermont Metropoli	Grant Type and Number Capital Fund Program Grant No. 501 00			FFY of Grant:2009 FFY of Grant Approval: 2009					
Type of G									
☐ Criginal Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no:									
Performance and Evaluation Report for Period Ending:									
Line	Summary by Development Account		l Estimated Cost		Actual Cost <sup>1</sup>				
		Original	Revised <sup>2</sup>	Obligated	Expended				
18a	1501 Collateralization or Debt Service paid by the PHA								
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment								
19	1502 Contingency (may not exceed 8% of line 20)								
20	Amount of Annual Grant:: (sum of lines 2 - 19)	356,763		101,700	55,001				
21	Amount of line 20 Related to LBP Activities								
22	Amount of line 20 Related to Section 504 Activities								
23	Amount of line 20 Related to Security - Soft Costs								
24	Amount of line 20 Related to Security - Hard Costs								
25	Amount of line 20 Related to Energy Conservation Measures								
Signatur	re of Executive Director Sarah Kincaid Date	7/9/2010 Si	gnature of Public Ho	ousing Director	Date				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Cap CFI			Grant Type and Number Capital Fund Program Grant No: 501.09 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009				
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual	Status of Work			
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>			
OH038051967	Public Housing Shortfall		1406		47,693		47,693	47,693			
OH038051967	Salaries and administrative exp	enses	1410		31,507		31,507	7,308			
OH038051967			1430		23,000		22,500				
ОН038051967	Replace shower unit, faucet and accessories	I	1460	58 units	137,442						
ОН038051967	Replace floor tile in bathroom, and entryway	kitchen	1460	65 units	75,131						
OH038051967	Replace toilet & shut off valve		1460	65 units	13,000						
ОН038051967	Replace washer hook up, dryer valve	vent &	1460	26 units	7,800						
ОН038051967	Replace hot water heater and m water valve	ain	1460	26 units	12,190						
OH038051967	Replace windows		1460	2 units	7,000						
ОН038051967	Replace concrete patio at comm building	nunity	1450		2,000						
						+		+			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	es									
PHA Name: Clermont Metropolitan Housing Authority			Grant Type and Number Capital Fund Program Grant No: 501.09 CFFP (Yes/ No): Replacement Housing Factor Grant No:					FFY of Grant: 20	009	
Development Number	General Description of Major	r Work	Development	Quantity	Total Estim	ated Cost	t	Total Actual (	Cost	Status of Work
Name/PHA-Wide	Categories		Account No.							
Activities					Original	Revised	i <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program						
PHA Name: Clermont Metro	Federal FFY of Grant: 2009					
Development Number Name/PHA-Wide Activities	Vame/PHA-Wide (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
ОН0380051967	09/30/2011		09/30/2013			
1						

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

A Name:					Federal FFY of Grant:
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PAR	T I: SUMMARY							
PHA	PHA Name/Number		Locality (City/County & State)			<b>⊠Original 5-Year Plan □</b> Revision No:		
Clern	nont Metropolitan Housing A	uthority	Clermon	t County				
A.	Development Number and Name/PHA Wide	Work Statement for Year 1 FFY	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014		
В	Physical Improvements Subtotal	Annual Statement	\$242,500.00	\$225,600.00	\$251,500.00	\$170,960.00		
C.	Management Improvements							
D.	PHA-Wide Non-dwelling Structures and Equipment		\$8,500.00	\$25,700.00	\$2,208.00	-0-		
Е	ADMINISTRATION		\$31,032.00	\$31,957.00	\$32,232.00	\$32,350.00		
F.	Other		\$23,000.00	\$23,000.00	\$23,000.00	\$10,000.00		
G.	Operations		\$47,468.00	\$46,543.00	\$44,968.00	\$112,442.00		
H.	Demolition							
I.	Development							
J.	Capital Fund Financing – Debt Service							
K.	Total CFP Funds		\$352,500.00	\$352,800.00	\$353,908.00	\$325,752.00		
L.	Total Non-CFP Funds			<u> </u>				
M.	Grand Total		\$352,500.00	\$352,800.00	\$353,908.00	\$325,752.00		

	PART I: SUMMARY (CONTINUATION)						
	PH	A Name/Number		Locality (City/county & State)	<b>⊠Original 5-Year Plan □Revision No:</b>		
	Development Number	Work		Work Statement for Year 3	Work Statement for Year 4	Work Statement for Year 5	
A.	and Name	Statement for	FFY	FFY	FFY	FFY	
		Year 1					
		FFY					
		Annual					
		Statement					

Part II: Sup	porting Pages – Physic	cal Needs Work State	ement(s)			
Work		Work Statement for Year 2		W	Vork Statement for Year: 3 FFY 2012	
Statement for Year 1 FFY	D1	FFY 2011 Quantity	Estimated Cost	Development	Estimated Cost	
2010	<b>Development Number/Name</b> OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost	Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost
	Replace refrigerator, range & range hood	88 Units	122,000	Seal coat/stripe parking lot	4 locations	25,700
	Replace bathtub, surround & faucet	25 units	63,000	Replace walkway roofing	1 location	25,000
	Install new floor tile & stair tread	8 units	28,000	Install new carpet in community room	1 location	10,000
	Replace sagging floor	1 location	5,500	Replace all walkway fixtures with Energy Star fixtures	102	30,600
	Replace sewer line to street	1 location	3,500	Install new hot water heaters and expansion tanks	106	53,000
See	Replace privacy fence	1 location	5,000	Install new floor tile in community building	2 locations	14,000
Annual	Replace shed doors	50	24,000	Install new floor tile/stair treads	5 units	28,000
Statement				Install new windows	65 units	65,000
	Subtotal of Estimated Cost		\$251,000.00	Subt	total of Estimated Cost	\$251,300.00

	porting Pages – Physic					
Work Statement for	•	Work Statement for Year: 4 FFY 2013	1	Work Statement for Year: 5 FFY 2014		
Year 1 FFY 2010	Development Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name OH038051967 General Description of Major Work Categories	Quantity	Estimated Cost
	Install new kitchen cabinets, countertops, faucet and grease shield	63 units	220,500	Replace electric panels/rewire	All buildings at three locations	42,505
	Install new windows	1 location	3,000	Replace smoke detectors	All buildings at three locations	38,955
See Annual Statement	Install culvert/concrete apron drive	1 location	2,208	Put in sensory equipment for 504 compliance	2 units	5,000
	Install new floor tile/stair treads	5 units	28,000	Bring 504 compliance up to code	3 locations	56,500
				Install new floor tile	5 units	28,000
	Subs	total of Estimated Cost	\$253,708.00	Sub	ototal of Estimated Cost	\$170,960.00

Part III: Su	pporting Pages – Management Needs Worl	x Statement(s)			
Work	Work Statement for Year: 2	2	Work Statement for Year: 3		
Statement for	FFY 2011	F : 10 :	FFY 2012		
Year 1 FFY 2010	Development Number/Name	Estimated Cost	Development Number/Name OH038051967	Estimated Cost	
2010	OH038051967		General Description of Major Work Categories		
	General Description of Major Work Categories	47.460	1 0	46.542	
	Public Housing Shortfall	47,468	Public Housing Shortfall	46,543	
	Partial Salary for Executive Director	5,116	Partial Salary for Executive Director	5,270	
See Annual Statement	Partial Salary for CF Inspector	23,858	Partial Salary for CF Inspector	24,574	
	Partial Salary for Financial Specialist	1,858	Partial Salary for Financial Specialist	1,913	
	Sundry Admin Expenses for CF	200	Sundry Admin Expenses for CF	200	
	Architectural and Engineering Fees	23,000	Architectural and Engineering Fees	23,000	
	Subtotal of Estimated Cost	\$101,500	Subtotal of Estimated Cost	\$101,500	
	Subtotal of Estimated Cost	\$101,300	Subtotal of Estimated Cost	Ψ101,500	

Part III: Su	pporting Pages – Management Needs Worl	k Statement(s)			
Work	Work Statement for Year: 4	4	Work Statement for Year: 5		
Statement for	FFY 2013	T	FFY 2014		
Year 1 FFY 2010	Development Number/Name OH038051967 General Description of Major Work Categories	Estimated Cost	Development Number/Name OH038051967 General Description of Major Work Categories	Estimated Cost	
	Public Housing Shortfall	44,968	Public Housing Shortfall	112,442	
	Partial Salary for Executive Director	4,749	Partial Salary for Executive Director	4,891	
See Annual Statement	Partial Salary for CF Inspector	25,311	Partial Salary for CF Inspector	26,070	
	Partial Salary for Financial Specialist	1,972	Partial Salary for Financial Specialist	1,189	
	Sundry Admin Expenses for CF	200	Sundry Admin Expenses for CF	200	
	Architect	23,000	Architect	10,000	
	Subtotal of Estimated Cost	\$100,200	Subtotal of Estimated Cost	\$154,792	
	Subtotal of Estimated Cost	Ψ100,200	Subtotal of Estimated Cost	Ψ15 1,772	

# ATTACHEMENT A RESIDENT COMMENTS

A meeting was held on May 3, 2010 at the Bethel Woods Community Building for presentation of the 2010 Annual/Five Year Plan to the Resident Advisory Board. Notification of the meeting was sent to all Public Housing and Housing Choice Voucher residents. The public meeting for comments regarding the plans was June 28, 2010.

There were only three comments from residents and all three questions were address during the meeting.

Comment 1 – When would the carpeting in the Community Building at Bethel Woods be replaced.

Response – Carpeting at Bethel Woods is not scheduled for replacement until 20102 and the carpet will probably be replaced with tile.

Comment 2 – Will the privacy fences between the apartments at Bethel Woods be replaced.

Response – The privacy fences were removed several years ago and will not be replaced.

Comment 3 – What windows will be replaced at Bethel Woods and when will they be replaced.

Response – All of the windows in the units at Bethel Woods are currently scheduled to be replaced in 2012.

Comment 4 – When will Capital Fund work be done on buildings 900 and 1000 at Bethel Woods.

Response – These units were just completed in 2008 and should not require any modification or renovation for at least ten years.

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### Attachment B VAWA Statement

In order to address the requirement of the Violence Against Women Act the Clermont Metropolitan Housing Authority revised its Public Housing Admissions and Continued Occupancy Policy and lease as well as its Housing Choice Voucher Administrative Plan. Board Resolution Number 07-1180 was adopted by the Authority's Board of Commissioners on January 29, 2007.

Residents of both the Public Housing and Housing Choice Voucher programs were notified by mail concerning the policy changes. Residents received a brochure which informed them about their rights under VAWA. At the time Resolution Number 07-1180 was adopted Clermont Metropolitan Housing Authority staff received information regarding the Act and copies of the policy changes. Staff received the necessary training required to understand the Act, policy changes and how to incorporate them into the day to day business of the Authority.

For the past thirteen years Clermont Metropolitan Housing Authority has had domestic violence as a local preference for placement on its waiting lists. Clermont Metropolitan Housing Authority does not have any activities, services or programs for residents in regard to preventing domestic violence. Clermont Metropolitan Housing Authority has an excellent working relationship with the local YWCA and the House of Peace, which provides protective shelter and supportive services for battered women and their children. Currently Clermont Metropolitan Housing Authority is in partnership with the YWCA in the Transitional Living Grant to assist with securing affordable housing for women who are victims of domestic violence in Clermont County.